



SUPPORT FOR PRIMARY EYE CARE DEVELOPMENT

National Optometric Conference 2010

The National Optometric Conference will be held on 4th & 5th November 2010 at the Park Inn Hotel, London Heathrow

Programme and registration details can be found here:

<http://www.aop.org.uk/conferences/12674388451696.html>

LOC Support Unit Newsletter

July 2010

Manchester LOC are Heroes in Health



Celebrating



Staff

LOCSU and The Optical Confederation would like to congratulate Manchester LOC on winning a Heroes in Health Partnership Award for their work in establishing an OHT Monitoring Scheme with Manchester Royal Eye Hospital (MREH) and Manchester PCT.

The LOC already has an excellent relationship with MREH and the PCT, and a Glaucoma Refinement Scheme has been in place locally for 8 years. Following the publication of NICE guidance on Glaucoma the PCT decided that they wanted a Gold Standard OHT scheme, and the first enhanced service based on the LOCSU OHT pathway was developed. The LOC and MREH arranged a training event for optometrists followed by a practical exam in the use of Goldmann tonometry.

Such was the confidence in the local Optometrists that some of the PCT staff acted as patients for the exams. The uptake among optometrists was very high, and the enthusiasm that was exhibited was very encouraging.

The partnership award was presented to Paul Showman, Manchester LOC Chair, at the Heroes in Health awards ceremony in at Manchester Town Hall on July 2nd 2010

FREE PLACE AT NOC

Like last year, this year there will be a free place available for each LOC at the National Optometric Conference. It is up to LOCs to apply for the place.

LOCs are asked to use the free place to bring along a member of their committee who has not attended the NOC before. LOCs applying for the free place will have to indicate this on the booking form with the LOC member's details who will take the place.

INVOLVE YOUR MP AND PCT

For the first time, LOCs will be given the opportunity to invite Members of Parliament and PCT chief executives to join us for dinner at the NOC. The cost of the dinner in each case will be borne by LOCSU.

LOCSU will supply a format letter for LOCs to use for the invitations and booking instructions for the dinner in the next Hot Brief.



LOCSU Associates Jane Bell and Katrina Venerus attended the Vision UK 2010 conference of Tuesday June 15th at the ICC, Birmingham.

Over 400 delegates gathered to celebrate success and learn about initiatives in eye health and sight loss services.

There was interest from all sectors in the LOCSU enhanced service pathways and how they link to the UK Vision Strategy, and Jane and Katrina were kept busy throughout the day with the high volume of visitors at the LOCSU stand.

As well as having a stand to greet delegates, LOCSU sponsored one of the afternoon work streams at the conference 'Improving the eye health of the people of the UK, chaired by David Scott- Ralphs – Chair, England Implementation Group UKVS; Chief Executive, SeeAbility

The workstream consisted of two sessions:

'Improving the eye health of the people of the UK. Who, what, where and when?' Geoff Roberson – Professional Advisor, Association of Optometrists

'Successful eye health initiatives from across the UK - building for an evidence base' Katrina Venerus, LOCSU Associate.

The interactive sessions provoked plenty of discussion and exchange of ideas for developing eye health and sight loss services.

Getting Eyecare into the PCT's Strategic Plan and Supporting QIPP

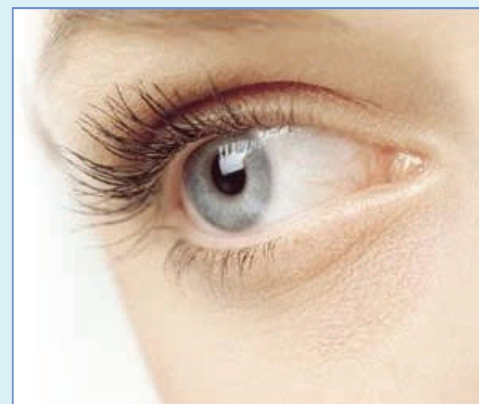
The increasing demand for hospital eye services has resulted in a number of PCTs identifying ophthalmology as a key focus area for their Strategic Plan. This move creates great potential for LOCs to promote primary care optometry initiatives to the PCT to improve patient pathways, reducing hospital referrals and associated costs. PCTs need to deliver projects that will meet the NHS Quality, Innovation, Productivity and Prevention (QIPP) Challenge, and the LOCSU enhanced service pathways provide a number of ready-made solutions.

Progress In North Tyne

One example is NHS North of Tyne who have recently implemented an Ophthalmology Working Group which will report to the PCT Planned Care Board. North of Tyne LOC Chair Angela Henderson says 'The Ophthalmology Working Group was established by the PCT initially to look at Glaucoma Guidelines and the North Tyneside IOP Refinement Pilot is the first of what we hope will be a series of Primary Care Enhanced Services in the coming years in our LOC area.'

Norfolk Referral Refinement

Another PCT looking to develop the local eyecare services under the QIPP agenda is NHS Norfolk. LOC representatives have met with the Director of NHS Norfolk's Primary Care Planned Programme Board who is interested in submitting a proposal for an Ophthalmology Referral Refinement Service based on the PEARS model. Katrina Venerus, LOCSU Associate says 'NHS North of Tyne and NHS Norfolk are just two examples among an increasing number of PCTs looking to engage their LOCs to develop community eyecare pathways in line with the QIPP agenda. We at LOCSU are delighted by the current levels of activity in commissioning of the enhanced service pathways and will continue to support LOCs in their quest to drive local eyecare services forward.'



MP Joins Local Opticians to Stress Importance of Regular Eye Checks

Yvonne Fovargue MP joined local eye health professionals and patients at Gore Hepworth Opticians in Ashton on July 5th 2010 to raise awareness of the crucial importance that early detection through regular eye tests is in reducing the number of people with avoidable sight loss.

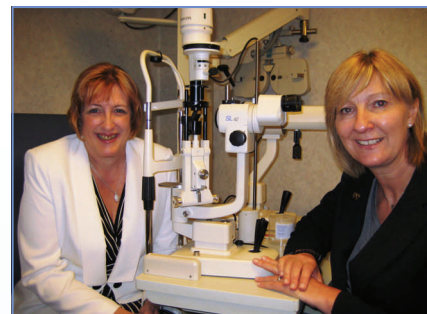
The Makerfield MP attaches great importance to eye health. She is short sighted and has suffered from post-vitreous detachment which has required laser treatment for correction.

The Borough has a low uptake of NHS sight tests compared with the national average. Furthermore the Local Optical Committee is pressing for better provision for services for the visually impaired, more cameras for diabetic retinopathy screening and to utilise the skills of Optometrists to provide enhanced eyecare services in the community reducing the need for hospital care.

Yvonne Fovargue MP encouraged people to have their eyes tested regularly and said: "I know from my personal experience just how important it is to take care of your eyes. Avoidable sight loss is a tragedy both for patients and the NHS, yet it can so easily be prevented through regular eye tests. A sight test can detect the early signs of conditions like glaucoma and, if diagnosed early, the right type of treatment could safeguard your sight. Eye examinations can also detect other conditions such as diabetes.

"I am grateful to Janet Green and the Local Optical Committee for the dedicated work they do and I will work with them to promote eye care in the Borough."

"My message today is prevention is better than cure, so book an eye test today with a local optician and ensure you have an eye test at least once every two years."



Janet Green, Chair of the Local Optical Committee said:

"I can not stress enough the importance of a regular eye test for both good vision and health for all age groups. Half of all sight loss is preventable. With support many of the experienced Optometrists in our Borough could ensure our community has eye care close to their home and an early appointment at the hospital if needed."



Updated Glaucoma and OHT Pathways

LOCSU has launched a revised pathway for Intraocular Pressure (IOP) Refinement which has been amended to incorporate joint advice recently issued by the Royal College of Ophthalmologists and the College of Optometrists on referrals for patients with raised intraocular pressure. There are specific groups of patients who are considered by NICE as having a low risk of developing risk of developing visual field loss in their lifetime and the joint guidance advises that practitioners may choose to not refer patients in these groups assuming all other aspects of the eye examination are normal.

It is important that the assessment of whether a patient falls into one of the identified low risk groups is made based on accurate IOP measurements, therefore IOP refinement with Goldmann (or Perkins) applanation tonometry is necessary before a decision on the need to refer can be made.

The updated document also contains helpful guidance on training and accreditation for the pathways.

New enhanced services based on the LOCSU pathways have already been commissioned by several PCT areas and there are many more PCTs in advanced stages of discussion with their LOCs regarding local implementation of the pathways.

Trevor Warburton (Chair of LOCSU's Clinical Advisory Group) said

"Early results from areas that have implemented refinement of pressure readings (Level 1a) show that referrals are reduced by well in excess of 50% so the economic argument for refinement is unassailable!"

Cindy Tromans, College President and Chair of the Joint College of Optometrists/Royal College of Ophthalmologists Joint Glaucoma Guideline Group said:

"The Joint Colleges' Glaucoma Guideline Group welcomes the publication of the updated LOCSU Referral Refinement Pathway, which reflects the Joint Guidance. We believe that the new pathway will make a significant contribution to the reduction of false positive referrals to the Hospital Eye Service and consequently to maximising the service that community optometrists and the Hospital Eye Service can deliver to the public."

LOCSU IN WALES



The role of LOCSU in Wales is supported by Sali Davis who is also employed by Optometry Wales. Sali attends each ROC meeting and provides not only administrative support in the form of minute taking but also handles negotiating within the newly re-structured Health Boards. The value of LOCSU has been demonstrated within the South East Wales ROC already with the health board lending support to the LOCSU Glaucoma Pathway. The Welsh Postgraduate Education Centre (WOPEC) will evaluate the pathway and this is an excellent example of how stakeholders can work collaboratively to review and continuously improve services. In addition Wales have used the Children's Screening Pathway to establish a steering group called Children's Vision in Wales (C.V.W) which is comprised of Optometrists and Orthoptics from across Wales. The work of the group is to review the LOCSU Children's Pathway and see if it can be used pan Wales or if not adopted locally. Feedback from our Orthoptist colleagues is positive and it is hoped that the pathway will be used. A similar approach has been taken in South West Wales where discussions are in place to pay participating optometrists a WECI type fee for children's cycloplegia refractions.

All three ROC's have now held strategic planning meetings and have consequently undergone some internal restructure to ensure that they work more efficiently. Because of the disparate geography of all three regions each ROC has appointed locality leads within the areas to report back to the Committee their progress with commissioning and general interaction with the health boards. Each ROC has been encouraged to host practice visits for Assembly Members (AM's) to highlight local issues within community based optometry and even AM's have been learning more about the role of LOCSU and how it can help AM's help their constituents. Pictured above is Helen Mary Jones AM, Deputy Leader of Plaid Cymru and Health Spokesperson.

In July each ROC will have access to a new website for their ROC hosted by Optometry Wales and linked to their current pages through the LOCSU site. The new website will provide forum and blogging areas so that communications across Wales and within each ROC can be strengthened. Members will be able to access and download relevant information to their ROC, post questions and generate discussions with their colleagues. Support for LOCSU and the valuable resources that are available has already been of great benefit to members in Wales, indeed being able to pick and choose from the menu of pathways has helped to cement the strong working relationships that contractors have had to forge in the recent restructure. With the recent tranche of AGM's within ROC's and with new faces at ROC level and health board level it would seem that the time is now right to place community based optometric services at the forefront of the new health board agenda in Wales.

Wiltshire LOC are first to sit Glaucoma/OHT OSCEs

In May Optometrists from Swindon, Banes and Wiltshire PCT were the first to sit Objective Station Clinical Examination (OSCEs) developed by LOCSU and WOPEC. The event at Bath Royal United Hospital was organised and co-ordinated by Keith Pearce, Wiltshire LOC.

The glaucoma referral refinement course was commissioned by LOCSU and developed by WOPEC with the entire material peer reviewed by NICE Guidelines committee members. The course consisted of distance learning lectures and a video with an online assessment. Templates for the practical assessments were developed by WOPEC and a training day was held for LOCSU Lead Assessors from 24 LOCs to help them to organise and oversee a 4 station OSCE on Van Herick's, Slit Lamp Biomicroscopy Indirect Ophthalmoscopy (BIO), Goldmann Applanation Tonometry (GAT) and checking calibration of GAT.

Liz Hews, Performance Improvement Manager from NHS Swindon, who attended the day said "I was really impressed by the optometrists who came forward to be assessed and by the robustness of the assessment process. This kind of initiative gives us confidence to extend the scope of community optometric to try to reduce unnecessary referrals to secondary care."

Barbara Ryan from WOPEC said "This is an exciting development for us. We were really impressed by how well Keith and the team organised and ran the OSCEs. Up until now we have organised and run all the assessments for initiatives in Wales and those we have been developing with PCTs in England. However, this opens up enormous potential for more partnership working, with training and accreditation developed by a university, but implemented and managed locally by optometrists.

Keith Pearce said "The LOCSU system of glaucoma and OHT referral refinement has been well designed to work with the new NICE guidelines, it has been agreed by all the relevant professional bodies, it is evidence based and has a clear cost benefit for the PCTs. It is a national system which gives the PCTs confidence to engage with it.

WOPEC's well designed assessments combine relevant knowledge with an assured standard of core competency techniques which gives the standard credibility and encourages trust from key groups in negotiations like ophthalmologists and PCTs.

We used the WOPEC template for the Assessment day, all the literature and systems were well documented and clear, creating meaningful and fair assessments. The quality of our assessors gave the candidates confidence in the fairness and thoroughness of the process and the day was co coordinated by two very well organised administrators who greeted, recorded and compiled all day.

The optometrists showing some nerves on arriving clearly found the process rewarding and welcomed the opportunity to improve their primary care function. The refreshed knowledge and practise of the techniques assessed will improve glaucoma referrals and the quality of optometry in our area. These skills are transferable to other PCTs who are enlightened enough to adopt the LOCSU system of Glaucoma and OHT referral refinement."

Enhanced Services Survey

Since the launch of the Enhanced Services Project in 2008 LOCSU has provided advice on commissioning of local pathways to the majority of LOCs. This advice ranges from simple email or telephone queries to bespoke help with writing and presenting business cases to PCTs and PBC groups. To allow LOCSU to measure the success of the Enhanced Services Project a short online survey was sent to LOC Chairs and Secretaries gathering information on local enhanced services activity. The survey was specifically to LOCs in England as the negotiations on enhanced services in Wales are more centralised.

A total of 48 (58%) of the 82 LOCs in England fully completed the survey. LOCSU would like to thank all of the LOC officers who took time to complete the survey.

Primary Eyecare Assessment and Referral Service (PEARS)

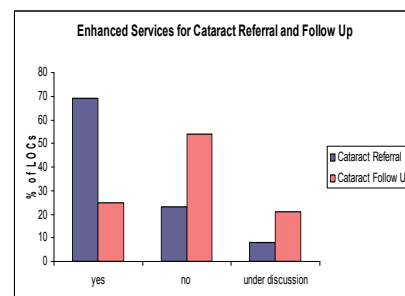
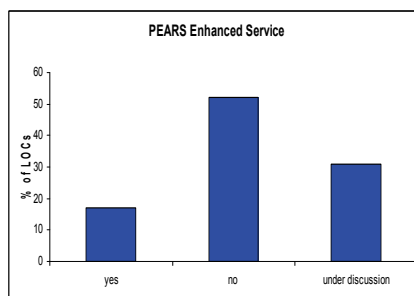
A number of LOCs have Primary Care based enhanced services for diagnosis and treatment of minor eye conditions, often known as 'Red Eye' pathways. Following the evidence which emerged from the Welsh PEARS scheme, and the subsequent development of the LOCSU package, there has been greater interest from commissioners in exploring the potential benefits of these pathways. 17% of LOCs reported that they have a PEARS type scheme in place, with a further 31% in discussion with commissioners re local implementation of PEARS.

Glaucoma Referral Refinement and OHT Monitoring

The LOCSU enhanced service pathways for Glaucoma Referral Refinement and OHT Monitoring published in response to the NICE Guideline CG85 : Glaucoma have been endorsed by the NICE Clinical Guideline Development Group and the Joint College Committee, and have provided a standard model for local commissioning. The survey compared the commissioning of Glaucoma Referral Refinement pathways pre and post the publication of the NICE guidance. The findings show that the percentage of LOCs with Glaucoma Referral Refinement in place or under discussion has risen from 38% 'pre NICE' to 90% 'post NICE'. The survey also shows a healthy interest in the commissioning of an OHT Monitoring Enhanced Service, with a total of 42% of LOCs reporting active local discussion around this pathway.

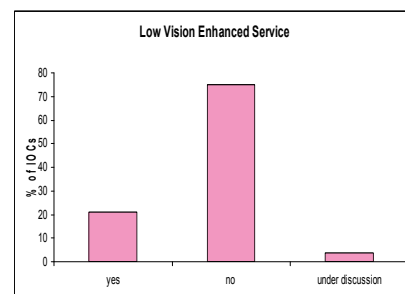
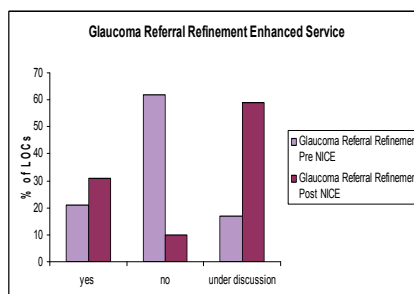
Cataract Referral and Follow Up Enhanced Services

Local enhanced services for Cataract Referral have been the most common of the eyecare pathways to be commissioned historically. 69% of the LOCs who responded to the survey have a Cataract Referral pathway in place, with another 8% under discussion. Interestingly, only 25% of LOCs have a Cataract Surgery Follow Up pathway. There is a clear opportunity to streamline the patient journey and reduce hospital visits in these areas, which will generate capacity in secondary care for those patients who require the expertise of hospital consultants.



Low Vision

A LOCSU team has been working on a Low Vision Pathway designed to provide an alternative or complementary service to existing low vision clinics currently centred in hospitals.. A staggering 75% of LOCs reported that there is no community optometry based Low Vision service in their area, therefore LOCSU sees huge potential for the commissioning of this enhanced service.



Enhanced Service Fees

LOCSU receives frequent enquiries re average fees being paid by PCTs to optometrists for Enhanced Services. The survey has gathered information on fees for existing services, and it is clear that local commissioning has resulted in inconsistency in the fees paid to optometrists providing enhanced services. Information is available to LOC Officers on request.

Conclusion

The survey has shown an increase in the number of community optometry based enhanced services being discussed and commissioned by PCTs. As more PCTs use the model enhanced service pathways developed by LOCSU, there is an opportunity for LOCs to provide standardised quality eyecare in the community. LOCSU will continue to work with LOCs who are striving to get local enhanced services commissioned. LOCSU will also develop tools to facilitate audit of commissioned services, enabling them to gather evidence to support business cases for other areas.



UK Vision Strategy

EPIC Project

Engagement Partnership Information Communication

Invitation for round two applications

The UK Vision Strategy EPIC project is now inviting applications from across England to take part in round two of the project.

The UK Vision Strategy seeks a major transformation in the UK's eye health, eye care and sight loss services, using a cross sector approach. The EPIC project pilots are designed to facilitate the implementation of the Strategy at local level through the creation of vision plans.

Who is eligible to apply?

Senior managers from health, local authority and voluntary sector organisations or others with a remit for sensory services. You should have already developed cross sector partnerships that are committed to developing a vision plan focusing on local priorities for eye care and sight loss services.

What is involved?

We will advise and guide successful areas through an evidence-based approach to identifying priorities for their local vision plan. In return we ask areas to share their experience of developing those plans, thereby enabling us to identify models of good practice and learning that can be disseminated across the UK.

How can I apply?

Contact Celia Watson, Project Manager, on 020 7874 1368 or visit the website <http://www.vision2020uk.org.uk/ukvisionstrategy/> for an application form and guidance notes.

Closing date Friday 6th August 2010

Calderdale Cataract Pathway Goes Live



A Cataract Referral Refinement enhanced service based on the LOCSU pathway went live on the 1st June 2010 in Calderdale, W Yorkshire. The implementation of this service has taken a staggering 18 months, and the LOC (particularly Andrew Thornton, Cataract Lead, Calderdale & Kirklees LOC), must be congratulated for their determination to see it through. Negotiations have at times been difficult, but collaborative working has resulted eventually in a patient focussed pathway.

An earlier Cataract Referral Refinement scheme in the area was suspended in 2006 due to a lack of audit data to prove the scheme's effectiveness. In their struggle to get the service recommissioned, the LOC managed to enlist the support of the Chair of a local Practice Based Commissioning Group who was interested in developing eyecare pathways, and also the Clinical Lead from the Hospital Eye Service. The group worked together with support from LOCSU to develop a proposal for a new service in early 2009, but the process then stalled as the LOC and PCT were unable to come to an agreement on appropriate fees.

The patience and unity of the LOC paid off as the PCT went on to audit local HES referrals and appointments and found 30% of those referred via GOS 18 and GPs did not proceed to surgery and many patients were being seen for multiple hospital appointments plus surgery. The anticipated savings that could be made by reducing the referral rate and also reducing the number of ophthalmology follow up appointments proved to be enough to fund both the community cataract referral refinement service and completion of an optometric post op report form.

20 of 25 local practices have signed up to the pathway, and the PCT has made provision for monitoring the service this time round. The LOCSU team hopes that the eventual success of Calderdale & Kirklees LOC in negotiating an appropriate service at an appropriate fee will inspire other LOCs who are currently involved in difficult discussions over fees and service specifications for enhanced services with their PCTs, to persevere. We look forward to reporting the success of the Calderdale Scheme as audit results emerge in the coming months.

Further details available from wendybianchi@locsu.org.uk

PRESS RELEASE



**SUPPORT FOR PRIMARY
EYE CARE DEVELOPMENT**



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**If your LOC has a story that you would like us to feature,
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We are happy to print your LOC stories, news or updates

**Many Thanks,
from the LOCSU Team**

**If you have any feedback on this
newsletter or would like to make
any comments regarding any of the
content, then please contact the
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